
Children's Special Health Internal Policy/Statement Cerebral Palsy

Description

Cerebral Palsy is characterized by a non-progressive impairment of movement and posture resulting from brain injury or anomaly occurring early in development. The manifestations of the movement disorder may change with growth and maturation, however, the primary brain disorder is static. A child may manifest any of the following:

- Hemiplegia
- Diplegia
- Quadriplegia
- Triplegia
- Monoplegia

Cerebral Palsy is classified by the anatomical distribution of the dysfunction and type of neurological involvement. The types of neurological involvement are:

- Spastic
- Dyskinetic (athetoid and dystonic)
- Ataxic
- Mixed (i.e. spastic-athetoid, spastic-ataxic)
- Atonic

Diagnostic Criteria

 Evaluation of motor milestones by neurometer screening tests (i.e. Movement Assessment for Infants, the Milani-Comparetti Motor Development Screening Test, and the Infant Neurological International Battery)

CSH Coverage

- Only providers listed on the Eligibility Letter will be paid
- Labs/Tests must be performed by a Wyoming Medicaid provider
- Well Child Checks (coverage limited to Pediatrician) according to AAP Periodicity Schedule
- Medications
 - Pre-approval through CSH required
- Equipment/Supplies
 - PRE-Authorization required

Contact CSH for questions regarding additional medication and/or equipment/supplies

Minimum Standards of Care/Care Coordination

Refer to Care Coordination Manual, Ch. 3, Pg. 8, Child and Family Assessment

- Perform Nursing Assessment with detailed focus on the following:
 - Nutrition and eating patterns
 - Exercise and physical activity
 - Current medications/any side effects or reactions
 - Known food and/or drug allergies
 - Height and weight, plot on growth curve
- Encourage testing as recommended by the American Academy of Pediatrics (AAP)
- School performance and behavior
- Encourage family and child to live as "normal and active" life as possible

Contact CSH if family is Non-Compliant (i.e. repeated missed appointments, failure to follow healthcare plan)

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• **Referrals** that may be recommended (CSH prefers Pediatric Specialist, if possible)

Visits to Providers may be limited due to budget

- Neurologist
- Orthopedist/Occupational Therapist
- Physical Therapist
- Developmental Specialist
- Nutritionist/Feeding Specialist
- Link the child and family with appropriate and needed services

Specialists may or may not be covered by CSH Program

• Well Child Checks

- Immunizations (including vaccinations)
- Assess and follow-up any abnormal findings
- Dental
- Vision
- Hearing

• Emergency Preparedness Plan

- Medic Alert ID bracelet / necklace should be encouraged
- Medical Emergency Plan of what to do for the child's care when away from home or with a
 different caregiver (i.e. communication, mobility, feeding instructions, medication
 types/frequency, what to do in the event of seizure)
- Discuss self-management of the disease
- Encourage the family to speak with the child's school in regards to the school's policy on Cerebral Palsy and emergency plan (i.e. administering medication, who will provide medical attention if seizure were to occur, classroom accessibility)

Health Record

- Encourage family to maintain a record of the child's health information ("Packaging Wisdom" as a suggestion) that includes:
 - Medication administration
 - Type
 - Dosage/Frequency, any side effects or response to medication
 - Seizure activity
 - Length of time/Frequency
 - Injuries acquired
 - Loss of conscience
 - Developmental milestones
 - Treatment/procedures and operations
 - List of providers and contact information, if available

Transition

Refer to the Care Coordination Manual, Ch. 3, Pg. 10, Coordinating Care

- Discuss with the family if the child is eligible for an IFSP, IEP, or qualify for Section 504 according to the American Disability Act (ADA)
- Transitional issues to discuss with client and family:
 - Social Security Supplemental Income (SSI)
 - Social Security Disability Insurance (SSDI)
 - Legal issues such as:
 - Guardianship, Power of Attorney, Conservatory
- Vocational Rehabilitation
- Adult residential/Community support services
- Long-term care

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